

with one agency. For decades, VA has not recognized the unique status of Native veterans and has charged them copays for care provided at VA.

For far too many Native Americans, particularly those in rural areas, the copay burden is a barrier to care. These veterans, who may be unable to access specialty care from their Tribal health systems, are then unable to access VA due to cost.

Eliminating the copay burden is a step toward upholding the treaties between the United States and Tribal nations while also bringing immediate relief to veterans unable to access care during these distressing times.

Madam Speaker, I want to thank Congressman GALLEG0 for his steadfast leadership on this issue. I encourage all of my colleagues to support H.R. 4908, as amended, and I reserve the balance of my time.

Mr. DAVID P. ROE of Tennessee. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 4908, the Native American Veteran Parity in Access to Care Today Act, or PACT Act.

The care that the Department of Veterans Affairs provides to veterans for conditions that are related to military service are always provided at no cost to the veteran. Veterans being cared for by VA for conditions that are unrelated to their military service may be charged a copayment to offset the cost of care and encourage appropriate use of the VA healthcare system.

According to the Government Accountability Office and the National Council of American Indians, approximately one-third of American Indian and Alaska Native veterans were charged copayments from VA in fiscal year 2017. Those copayments averaged just under \$300 per veteran.

However, almost a century ago, Congress passed the Snyder Act, which guaranteed healthcare to Native Americans free of charge. In recognition of that, the Native American PACT Act would prohibit VA from charging copayments to Native American veterans regardless of whether the care they receive from the VA is for a service-connected condition or not.

There is no ethnic group that volunteers to defend the United States in uniform at a higher rate than Native Americans whose history of service to this country dates back to the Revolutionary War. This bill would increase access to care for those brave veterans and create parity between the care provided to them through the VA, the Centers for Medicare and Medicaid Services, and the Indian Health Service. It would also uphold the United States Government's longstanding trust and treaty responsibilities to the Native American community.

The Native American PACT Act is sponsored by my colleague and fellow veteran, Congressman RUBEN GALLEG0 from Arizona. I am glad to stand with him in support of its passage today.

Madam Speaker, I encourage all of my colleagues to support this bill, and I yield back the balance of my time.

Mr. TAKANO. Madam Speaker, I too ask all of my colleagues to join me in passing H.R. 4908, as amended, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 4908, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

□ 1400

CFO AUTHORITY AND COLLABORATION ACT OF 2020

Mr. TAKANO. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 6589) to direct the Secretary of Veterans Affairs to develop and submit to Congress a plan to address the material weakness of the Department of Veterans Affairs, and for other purposes.

The SPEAKER pro tempore. Does the gentleman call for the bill, as amended?

Mr. TAKANO. I am checking. I do not have "as amended." Madam Speaker, I stand by the motion that I made that we suspend the rules and pass H.R. 6589.

The SPEAKER pro tempore. The Clerk will report the title of the bill.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 6589

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "CFO Authority and Collaboration Act of 2020".

SEC. 2. PLAN TO ADDRESS MATERIAL WEAKNESS OF DEPARTMENT OF VETERANS AFFAIRS.

Not later than 180 days after the date of the enactment of this Act, the Secretary of Veterans Affairs shall—

(1) develop a plan, including steps and related timelines, for fully addressing—

(A) the repeated material weakness of the Department of Veterans Affairs; and

(B) the recommendations of the auditor related to entity level controls, including the organizational structure of the office of the Chief Financial Officer of the Department; and

(2) submit to the Committees on Veterans' Affairs of the Senate and the House of Representatives a report containing a description of—

(A) the plan developed under paragraph (1); and

(B) the steps the Secretary plans to take to provide sufficient authority to the Chief Financial Officer of the Department to carry out the requirements of section 902 of title 31, United States Code.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. TAKANO) and the gen-

tleman from Tennessee (Mr. DAVID P. ROE) each will control 20 minutes.

The Chair recognizes the gentleman from California.

GENERAL LEAVE

Mr. TAKANO. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to insert extraneous material on H.R. 6589.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

Mr. TAKANO. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in support of H.R. 6589, the CFO Authority and Collaboration Act of 2020, which addresses the sometimes arcane but also very important need for strong financial management and accountability at the Department of Veterans Affairs.

Madam Speaker, each year, VA spends billions of dollars in support of our Nation's veterans. Taxpayers deserve to know that each dollar is spent wisely and that each dollar is properly accounted for in order to avoid waste, fraud, and abuse.

Madam Speaker, the VA inspector general has determined what is called a "material weakness" in how the Office of the Chief Financial Officer is structured. This was a topic examined during hearings and through oversight by our Subcommittee on Oversight and Investigations.

Mrs. LEE's legislation requires a small but important fix to ensure strong financial accountability. I thank Mrs. LEE for sponsoring this bipartisan legislation, and I urge my colleagues to support H.R. 6589.

Madam Speaker, I wish to, at this point, withdraw the motion.

The SPEAKER pro tempore. The motion is withdrawn.

DEPARTMENT OF VETERANS AFFAIRS CHIEF FINANCIAL OFFICER AUTHORITY AND COLLABORATION ACT OF 2020

Mr. TAKANO. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 6589) to direct the Secretary of Veterans Affairs to develop and submit to Congress a plan to address the material weakness of the Department of Veterans Affairs, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 6589

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Department of Veterans Affairs Chief Financial Officer Authority and Collaboration Act of 2020".

SEC. 2. PLANS FOR ADDRESSING MATERIAL WEAKNESSES AND PROVIDING SUFFICIENT AUTHORITY TO CHIEF FINANCIAL OFFICER OF DEPARTMENT OF VETERANS AFFAIRS.

Not later than 180 days after the date of the enactment of this Act, and annually thereafter for each of the three subsequent years, the Secretary of Veterans Affairs, acting through the Chief Financial Officer of the Department of Veterans Affairs, shall submit to the appropriate congressional committees—

(1) an action plan, including steps, related timelines, costs, progress, status of implementation, and any updates for fully addressing the material weaknesses of the Department discussed in the Management's Discussion and Analysis section of the financial statements of the Department submitted to Congress under section 3515 of title 31, United States Code for the year preceding the year during which the report is submitted; and

(2) a plan outlining the steps the Secretary plans to take to address the recommendations of auditors related to entity-level internal controls and to provide sufficient authority to the Chief Financial Officer of the Department to carry out the requirements of section 902 of title 31, United States Code.

SEC. 3. CHIEF FINANCIAL OFFICER ATTESTATION.

Concurrent with the submittal to Congress of the President's budget request under section 1105 of title 31, United States Code, for fiscal year 2022 and each of the next three subsequent fiscal years, the Chief Financial Officer of the Department of Veterans Affairs shall submit to the appropriate congressional committees each of the following:

(1) A certification of the responsibility of the Chief Financial Officer for internal financial controls of the Department.

(2) An attestation that the Chief Financial Officer has collaborated sufficiently with the subordinate chief financial officers of the Department to be confident in the financial projections included the budget request and supporting materials.

SEC. 4. CHIEF FINANCIAL OFFICER RESPONSIBILITY FOR SUBORDINATE CHIEF FINANCIAL OFFICERS.

(a) *IN GENERAL.*—In accordance with the responsibilities of the Chief Financial Officer of the Department of Veterans Affairs for the recruitment, selection, and training of personnel to carry out agency financial management functions pursuant to section 902(a)(5)(C) of title 31, United States Code, the Chief Financial Officer or the designee of the Chief Financial Officer within the Office of Management of the Department shall—

(1) participate in the interview and selection panels of all subordinate chief financial officers; and

(2) give input into the performance plans and performance evaluations of all subordinate chief financial officers.

(b) *TERMINATION.*—The requirements under subsection (a) shall terminate on the date that is five years after the date of the enactment of this Act.

SEC. 5. DEFINITIONS.

In this Act:

(1) The term “appropriate congressional committees” means the Committees on Veterans’ Affairs of the Senate and the House of Representatives and the Committees on Appropriations of the Senate and the House of Representatives.

(2) The term “subordinate chief financial officer”—

(A) includes—

(i) the chief financial officer of the Veterans Health Administration, the chief financial officer of the Office of Community Care within the Veterans Health Administration, and all chief financial officers of Veterans Integrated Service Networks within the Veterans Health Administration;

(ii) the chief financial officer of the Veterans Benefits Administration and all chief financial

officers of organizational subdivisions representing business lines within the Veterans Benefits Administration;

(iii) the chief financial officer of the National Cemetery Administration; and

(iv) the chief financial officer of the Office of Information and Technology; and

(B) does not include the Inspector General.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California (Mr. TAKANO) and the gentleman from Tennessee (Mr. DAVID P. ROE) each will control 20 minutes.

The Chair recognizes the gentleman from California.

GENERAL LEAVE

Mr. TAKANO. Madam Speaker, I ask unanimous consent that the comments that I made on my previous motion that I withdrew be inserted in the RECORD in conjunction with my motion to pass H.R. 6589, as amended.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

Mr. TAKANO. Madam Speaker, I reserve the balance of my time.

Mr. DAVID P. ROE of Tennessee. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 6589, the VA Chief Financial Officer Authority and Collaboration Act.

Each year, the Department of Veterans Affairs manages to pass its financial statement audit despite a number of persistent material weaknesses in what appears to be a stalemate. VA never quite loses its unqualified audit opinion but never materially improves either. We should expect more, especially with VA's budget approaching \$250 billion and its total liabilities reaching near \$3.3 trillion.

Madam Speaker, I thank Congresswoman SUSIE LEE from Nevada and General JACK BERGMAN from Michigan for sponsoring this bill to address the root cause of the problem, the VA's Chief Financial Officer's lack of operational authority over the dozens of lower level chief financial officers throughout VA.

This bill would direct VA to develop a detailed action plan to resolve material weaknesses and require VA's Chief Financial Officer to attest to the Department's financial projections and internal controls in VA's annual budget submission.

It would also strengthen VA's Chief Financial Officer's operational authority by involving them or their designee in the hiring and performance evaluations of subordinate chief financial officers.

All of these reforms are consistent with the Chief Financial Officer Act of 1990.

I support this legislation because it is a carefully crafted solution to an old problem with escalating consequences.

Mr. Speaker, I reserve the balance of my time.

Mr. TAKANO. Mr. Speaker, I reserve the balance of my time.

Mr. DAVID P. ROE of Tennessee. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I encourage all of my colleagues to support this bill, and I yield back the balance of my time.

Mr. TAKANO. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I thank Mrs. LEE and Dr. ROE for helping me bring this legislation to the floor. I ask all of my colleagues to join me in passing this very important piece of legislation, H.R. 6589.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mr. CLEAVER). The question is on the motion offered by the gentleman from California (Mr. TAKANO) that the House suspend the rules and pass the bill, H.R. 6589, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

VA MISSION TELEHEALTH CLARIFICATION ACT

Mr. TAKANO. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 3228) to amend title 38, United States Code, to authorize health professional trainees to provide treatment via telemedicine, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3228

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “VA Mission Telehealth Clarification Act”.

SEC. 2. LICENSURE OF HEALTH CARE PROFESSIONALS PROVIDING TREATMENT VIA TELEMEDICINE.

Section 1730C(b) of title 38, United States Code, is amended to read as follows:

“(b) COVERED HEALTH CARE PROFESSIONALS.—For purposes of this section, a covered health care professional is any of the following individuals:

“(1) A health care professional who—

“(A) is an employee of the Department appointed under section 7306, 7401, 7405, 7406, or 7408 of this title, or under title 5;

“(B) is authorized by the Secretary to provide health care under this chapter;

“(C) is required to adhere to all standards for quality relating to the provision of health care in accordance with applicable policies of the Department; and

“(D) has—

“(i) an active, current, full, and unrestricted license, registration, or certification in a State to practice the health care profession of the health care professional;

“(ii) qualifications prescribed by the Secretary under section 7402(b) of this title for an appointment to a position in the Veterans Health Administration; or

“(iii) other authorization from the Secretary to provide health care.

“(2) A health professions trainee who—

“(A) is appointed under section 7405 or 7406 of this title; and

“(B) is under the clinical supervision of a health care professional described in paragraph (1).